ISSUE SLIP STAPLE AREA (for additional cross references) ID NO. **POSITION INITIALS** DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW INDEX OF CLAIMS** Rejected Non-elected Interference Allowed (Through numeral)... Canceled Appeal Restricted O Objected Claim Date Date Date Claim Claim Final Original Original Final (22) If more than 150 claims or 10 actions staple additional sheet here